

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000002477

Entity Name: MERIDIAN LAND CO.

FILED
Apr 08, 2005
Secretary of State

Current Principal Place of Business:

ONE 157 CENTER
EDWARDSVILLE, IL 62025

New Principal Place of Business:

Current Mailing Address:

ONE 157 CENTER
EDWARDSVILLE, IL 62025

New Mailing Address:

FEI Number: 37-1375609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVATORI, LEO ESQ
% SALVATORI AND WOOD
4001 TAMiami TRAIL NORTH, SUITE 330
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAISER, TIMOTHY
Address: 1417 WASHINGTON AVE
City-St-Zip: ALTON, IL 62002 US

Title: SD () Delete
Name: WINFIELD, CLAY
Address: 10001 TAMiami TRAIL
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAISER, TIMOTHY N
Address: 1417 WASHINGTON AVENUE
City-St-Zip: ALTON, IL 62002 US

Title: VPSD (X) Change () Addition
Name: WINFIELD, CLAY O
Address: 10001 TAMiami TRAIL NORTH
City-St-Zip: NAPLES, FL 34108 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY N. KAISER

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date